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			Examiner Name						
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ENCLOSURES (Check all that apply)									
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Firm Name	EPSTEIN DRANGEL BAZ	ZERMAN &	JAMES, LLP						
Signature	Ell L	>4	Al /						
Printed name	Robert L. Epstein, Esq.								
Date May 18, 2007			Reg. No. 26451						
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/807,665	
Filing Date	March 24, 2004	
First Named Inventor		
Art Unit		
Examiner Name		
Attorney Docket Number	2429-100US	

I hereby revoke all previous powers of attorney given in the above-identified application.										
A Power of Attorney is submitted herewith.										
OR ✓ I hereby appoint the practitioners associated with the Customer Number: 25881							5881			
Please change the correspondence address for the above-identified application to:										
✓ The address associated with Customer Number: 25881										
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City				State				Zip		
Country										
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I am the: Applicant/Inventor.										
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
SIGNATURE of Applicant or Assignee of Record										
Signature	Signature Ponson Dele									
Name	Name PHEERAPHAN WIJITPHAN									
Date	Date MAIX 2502007			Te	Telephone O			181-5724699		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
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